

State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14)

(CFA-4) Summary Sheet

FILE NUMBER

Approved by State Board of Accounts 1999

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For 3: 45 assistance in completing this form, see instructions on the reverse side.

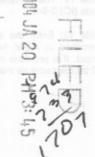
IS THIS AN AMENDMENT? Yes COMMITTEE INFORMATION 1. Full name of committee (as on Statement of Organization) 3. Committee telephone number 2. Acronym or abbreviated name, if any Check if this is a new address 4. Mailing address (address where all campaign finance correspondence is received) 6. Party affiliation (if applicable) 5. City, state, ZIP code 05275111217 CANDIDATE INFORMATION (For Candidate's Committees Only) 8. Party affiliation or if independent candidate 7. Full name of candidate (include any nickname) EPUBLICION 9. Office sought (Include district number, if any. Not required for exploratory committee.) 10. County of residence LOUDGIL AUILTON CONVENTION CANDIDATES ONLY TYPE OF REPORT 11. Check one: Check one: Pre-Primary Pre-Election Annual Final/Disbands Committee (lines 18, 19, and 20 must be "0") Pre-Convention Post-Convention Outgoing Treasurer (within 10 days amend Statement of Organization) 12. Reporting Period: **COLUMN B** COLUMN A Year to Date From: 10-11-03 Through: 12-31-03 This Period 13. Cash on hand and investments at the beginning of this reporting period. 14. Cash on hand and investments January 1, current year. CONTRIBUTIONS AND RECEIPTS (Note: these amounts include in-kind contributions and loans, as well as cash contributions.) 15a. Itemized (use Schedule A) 15b. Unitemized 15c. Add lines 15 a and 15b in both columns SUBTOTAL 16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B TOTAL **EXPENDITURES** (Note: These amounts include in-kind expenditures and loan repayments.) 17a. Itemized (use Schedule B) (Public Question: use Schedule C) 17b. Unitemized 17c. Add lines 17a and 17b in both columns SUBTOTAL 18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns) TOTAL 19. Debts OWED BY the committee (use Schedule D) 20. Debts OWED TO the committee (use Schedule E)

CERTIFICATION

Signature on File

files a fraudulent report commits a Class D felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class 8 misdemeanor, (JC 3-14-1-14) and may be subject to civil penalties. (IC 3-9-4-16, IC 3-9-4-17, IC 3-9-4-18):

FOR OFFICE USE ONLY





State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

#### (CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE
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IC 3-9-1-24 5) etribution for the committee. (IC 3-9-1-	Other Receipts: Interest Loan Misc. (specify)	tee's ecount, M he committee ma	immoo erii ni xe hein5 :YE CEN	RECEI 28)
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State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

## (CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
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#### (CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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# (CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other incorne) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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#### (CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contribution, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-hidd contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of depost, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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ITEMIZED EXPENDITURES

Approved

State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) by State Board of Accounts 1999

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

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(CFA-4 SCHEDULE B)

RECIPIENT'S NAME AND MAILING ADDRESS)	RECIPIENT'S OCCUPATION	TYPE OF EXPENDITURE and	COLUMN A AMOUNT THIS	COLUMN B CUMULATIVE	DATE OF
(street, number, city, state, ZIP code)	OFFICE SOUGHT (if applicable)	PURPOSE (be specific)	PERIOD	YEAR-TO-DATE	EXPENDITURE
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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

# (CFA-4 SCHEDULE C) ITEMIZED EXPENDITURES For Public Questions

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(CFA-4 SCHEDULE D)
DEBTS OWED BY THIS COMMITTEE

State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
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TOTAL OF ALL PAGES OF SCHEDULE D ON THE LAST PAGE ONLY (Enter total on ITEM 19 of the Summary Sheet)					\$



State Form 4606 (R10/11-03) Indiana Election Commission (IC 3-9-5-14) Approved by State Board of Accounts 1999

## (CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

F	LE NUMBER	
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loans or	report all previous extinouished.	$\perp$
Page	of	

BORROWER'S NAME & MAILING ADDRESS (street, number, city, state, ZIP code)	CO-SIGNER;S NAME & MAILING ADDRESS (if any)	DATE DEBT DAID	CUMULATIVE	OUTSTANDING BALANCE THIS		
	(street, number, city, state, ZIP code)	NATURE OF DEBT	INCURRED	YEAR-TO-DATE	PERIOD	
g augress of the person to	e reponing period.	ven a loan within th	g aart estim	eporting con	whom the	
address of all co-make a b was secured by anot ar	rithe full name and mailing by the reporting confinite	ADDRESS CHO rs. if the loan made	MAILIAM CHANGE, or endorse	RIS NAME ,	CO-SIGNE co-signers entity	
aned to another person.	d vis ini eli / k	er ant thuems lagic	inter the principal	A-MOUNT: I	ORIGINAL	
orumillae. This requires a				OF DEBT: Er	NATURE (	
ort yo abom asw about M	and year that initial Len	nter the month, day	CURRED: 6	JIGATION IN	DATE OBI	
the committee on a dept	r isgs) lagionng to fauur	E Enter the total a	TAG-OT-SA	EY GLAS BV	CUMULAT CHIALOUS	
	mittee on a loan, the arnord reported on Schedula A			a A. If the int		
ebt to be collected by the offected by the committee		RIOD: Enter the or out the outstanding	ICE THIS PL	You must ea	OUTSTAN committee.	
chadule E. If there is only IN SCHEDULE E.	subtotal for this page of S	guishad.  U.E.E.: Enfar that  E.Dre same as the	CORRES EXCHEI E OF SCHEI E, the figure I		SUBTOTAL OF	
TEM 20 of the Summary	lsa enter this figure on I	on Schedule E. I		otal amoun		
2.0						
( Jan 1		SUBTOTA	L THIS PAGE OF	SCHEDULE E	s	
	TOTAL OF ALL PAGES OF SCHEDULE E ON THE LAST PAGE ONLY (Enter total on ITEM 20 of the Summary Sheet)					

#### Busby, Terry

Mail Name: Hon. Terry L. Busby

Home Address:

Work Address:

Mail Address:

20793 Waterscape Way

20793 Waterscape Way

Noblesville, IN 46060-

Noblesville, IN 46060-

Salutation: Terry

Affiliation:

Origin:

DoB:

Type:

Individual

Gender:

M

Employer: Occupation:

Voter ID:

0000081554

Home Phone: 317-877-8415

Work Phone: - -

Fax(H):

rax(n).

Fax(W):

Alt:

\_ \_

Portable: 31

317-750-4078

Pager:

E-Mail:

Mont 11/26/03 in addition to the pre-election the pre-election report and. of report \$1,467.07